

**PART C COORDINATOR  
Informed-Consent Form**

The purpose of this exploratory study is to elicit your understanding of leadership within the Early Intervention Program for Infants and Toddlers with Disabilities of the Individuals with Disabilities Education Act (IDEA) Part C. Specifically, we are conducting a national study using a Delphi method in which panels of identified leaders in the Part C program will serve as participants to develop a beginning understanding of leadership in Part C through consensus.

- Participation is **voluntary**. You may **withdraw from this study at any time** without adverse consequences or jeopardizing your relationship with the University of Hartford.
- In agreeing to participate, you will **nominate 16 individuals** from your state or territory who have demonstrated exceptional leadership efforts at the national, state, or local levels on behalf of the Part C program or the infants and toddlers and families with whom they work. Specifically, you will provide contact information for four individuals from each the following groups: (a) local program administrators, (b) direct service providers, (c) family members of children with disabilities who have participated in the Part C program, and (d) higher education faculty who prepare personnel to work in Part C or conduct research concerning Part C.
- You and the other panelists will **respond to a series of three online questionnaires**, during three separate sessions over a 12-week timeframe; each questionnaire will take 30–40 minutes to complete.
- Your **completion of each online questionnaire implies consent to participate** in the study and to use the information you provide in the study write-up and any presentations or publications.
- You may **benefit** by knowing that you are contributing to the knowledge base about leadership in Part C of IDEA; thus, you will help to inform practice in Part C and personnel preparation.
- **Risks** of participation in this study are no greater, considering probability and magnitude, than those ordinarily encountered in daily life. There are no apparent physical risks.
- The questionnaires will be administered via Zoomerang, an online survey software tool. A unique URL is created for each survey respondent. This method allows us to see which participants have not yet responded to the survey, allowing us to send reminder emails to those individuals. The researchers are the only ones who have access to the raw data and who will be able to see individual responses; thus, individual survey responses will not be anonymous to us.
- All survey data will be reported in aggregate. **Individual responses will not be reported and will be kept in confidence.**
- All digital files and data will be saved in a secure computer and all paper files will be stored in a locked file cabinet. Data will be destroyed five years from completion of the study.
- If you have any question about your rights as a research subject, please contact the University of Hartford Human Subjects Committee (HSC) at 860.768.4310. The HSC is a group of people that reviews research studies and protects the rights of people involved in research.

**If you have any questions about this study, you may contact either of the researchers.**

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**Please keep this form for your records.**

## Training Coordinator Conference Call

<b>DATE and TIME:</b>	August 17, 2010	2:00 - 3:30 EDT
<b>CALL IN NUMBER</b>	1-888-808-6959	Code 6254120367
<b>FACILITATOR:</b>	Janice Miller, Room 335N	
<b>NOTES TAKEN BY:</b>	Haylie Smith	
<b>LES Representation on the Call:</b>	Bay	Annalise Campisi, Kay Connelly
("X" = LES participated on the call)	Big Bend	Juli Melara
	Central	Mary Grimmer, Lynn Coleman
	Gold Coast	Jeanne Miley
	Gulf Central	
	North Beaches	
	North Central	Sharon Hennessey, Dr. Marie Denney
	North Dade	
	Northeastern	Amy Lane
	Southernmost Coast	Elma Pierre
	Southwest	Trina Puddlefoot, Elli Grim
	Space Coast	Amanda Farrell, Althea Puzio
	Treasure Coast	Sarah Corrigan
	West Central	Jamie Johnson
	Western Panhandle	Penny Geiger
	FSU	Terry Hoover
	ESSO	Liza Smith, Patricia Herring, Kelly Purvis, Carol Burch

TOPIC	PRESENTER	RELATED DOCUMENTS/REFERENCES	OUTCOME
Tools for Early Steps Teams Project	Sharon Hennessey and Dr. Maria Denney		An update was given on the purpose of the project and the progress made thus far. It is referred to as Project TESTS (Tools for Early Steps Teams) supporting implementation of teaming within the service provider approach that is supported by Early Steps. The purpose of the project is to develop, validate and evaluate a professional toolkit, specifically focusing on integrated service delivery. Six components for the model are coming from PEDS Plus from the state of TN. In their intervention system, components being used include conducting, planning, linking goals, integrating services, monitoring progress, and ensuring smooth transition from Part C to other programs or agencies. The toolkit will align with ES policy as well as professional development practices.
			Piloting for the project will occur in the North Central Early Steps. It will include developing and validating the project with two highly seasoned and qualified teams. They have obtained the utility of the components and other sources of preferences or products through monthly meetings being held with the teams. At a meeting last week, technology was introduced to each of the teams along with support materials regarding integrated service delivery. Role release and role supports have identified families that they plan to work with while piloting this project. They have flip cameras to use with the families. The teams have also received netbooks in addition to the cameras. The providers are very eager to work on this project. There will be a break-out session on the project at the Statewide Meeting where you can obtain further information.
Discussion on Securing Professional Speakers and a Mentoring Program	Elli Grim	Focus the discussion on obtaining professional speakers for Down Syndrome, Infant Mental Health, Feeding & Autism and on mentoring for the PSP model	Elli led a discussion to obtain information and ideas from other training coordinators on how to obtain speakers and presenters at little to no cost. She is especially interested in the topics of Down Syndrome, Infant Mental Health, Autism, Mentoring for the PSP Model and tips to address feeding issues. Some of the ideas that were shared are as follows: (1) Penny Geiger recently had a Speech Language Pathologist provide two days of training for staff, providers and families at a small cost per person and she provides training herself at no cost. She also sent an attachment on Feeding Training that will be attached to the minutes; (2) Webinars are a good source. Telestan.com is \$60/month with unlimited webinars; (3) Amanda Farrell stated that they use their providers as trainers and they have used ARRA funds for training;

			(4) a suggestion was made to tape some of the statewide meeting sessions. Terry Hoover will check into the possibility; (5) Sarah Corrigan shared the following websites that provide training on Down Syndrome, Infant Mental Health and Autism - <a href="http://goldcoastdownsyndrome.org/index.php?MenuID=37">http://goldcoastdownsyndrome.org/index.php?MenuID=37</a> , <a href="http://www.cscpsc.org/trainings">http://www.cscpsc.org/trainings</a> and <a href="http://www.coe.fau.edu/card/">http://www.coe.fau.edu/card/</a> (6) everyone is encouraged to attend the statewide meeting to obtain information that can be shared and used for training. Elli led an excellent discussion and valuable ideas were shared.
Early Steps Statewide Meeting Update	Haylie Smith	Early Steps Statewide Meeting Update	The draft agenda, reservations information and registration information for the Early Steps Statewide Meeting went out in the Friday, August 12 ESSO Weekly Memo. Continue to read the weekly memo for more information regarding how to obtain your handouts for the breakout sessions.
Next Call			September 21 from 2:00 - 3:30 EDT (Same Conference Call Number and Code)

**From:** State of Florida Agency for Health Care Administration [medicaid\_alert@ahca.myflorida.com]

**Sent:** Friday, July 30, 2010 3:22 PM

**To:** Burch, Carol D

**Subject:** NPI Implementation



*Better Health Care for All Floridians*

# FLORIDA MEDICAID

*A Division of the Agency for Health Care Administration*

## Health Care Alerts & Provider Alerts Messages July 2010

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**Provider Type(s): All**

### **NPI Implementation**

The purpose of this alert is to let you know about changes in Florida Medicaid that will impact most providers who submit claims to the Florida Medicaid program. The Health Insurance Portability and Affordability Act (HIPAA) of 1996 mandated the implementation of a National Provider Identifier (NPI). Most health care providers must register with the National Plan and Provider Enumeration System and receive a unique NPI. The intent of the HIPAA regulations was to require all health plans to convert their claims processing systems to use only the NPI for claims processing and reporting for providers required to obtain an NPI. Because of the complexities of this conversion by health care plans and providers, the use of the NPI has not yet been strictly enforced. However, Medicaid claims submitted on and after January 1, 2011, will have new requirements for the use of the NPI.

#### ***Starting January 1, 2011***

In order to enhance Medicaid efforts to ensure that the program is providing quality, affordable health care for all Americans, the United States Congress included provisions in the Patient Protection and Affordable Care Act of 2009 that mandates changes in Medicaid rules for enrolling providers and submitting claims. Starting January 1, 2011, Medicaid will require that all providers who must obtain an NPI include their NPI on all claims submitted to Medicaid. This will include all claims from these providers, whether submitted on paper or electronically. The Medicaid provider number will be allowed to accompany the NPI on claims; however, claims that do not contain the NPI will be denied. Look for further instructions in the near future for these new requirements.

#### ***Starting April 2011***

The X12 transactions mandated by HIPAA are being modified with a new version, known as 5010. As Florida prepares to convert electronic transactions to the new version of HIPAA, further changes in the electronic claims are needed for the use of NPI for providers who must obtain an NPI. The 5010 version of the claims transactions will no longer allow providers to include the Medicaid provider number as part of the transaction and will allow only the NPI. This affects only electronic claims. Consequently, in preparation for the 5010

implementation, Florida Medicaid will no longer accept X12 claim transactions that contain the Florida Medicaid provider number starting in April 2011. Electronic claims that contain the Medicaid provider number will be denied. Florida Medicaid will provide further instructions in the near future on the 5010 implementation and associated changes that will be required later in 2011.

Thank you for your continued service to Florida Medicaid recipients.

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## QUESTIONS ABOUT FLORIDA MEDICAID?

Please direct questions about Medicaid policies to your local Medicaid area office. The Medicaid area offices' addresses and phone numbers are available on the [Area Offices](#) Web page.

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## ALERTS INFORMATION

The Florida Medicaid program has created an e-mail alert system to supplement the present method of receiving Provider Alerts information and to alert registered subscribers of "late-breaking" health care information. An e-mail will be delivered to your mailbox when Medicaid policy clarifications or other health care information is available that is appropriate for your selected area and provider type.

Visit the [Florida Medicaid's Health Care Alerts](#) page to subscribe now. You may unsubscribe or update your subscription at any time by clicking on the "Manage your subscription" icon in the footer of each e-mail. Other questions regarding the e-mail alert system can be sent to the [Florida Medicaid Alerts Administrator](#).

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